

700 W. State Street, 3rd Floor P.O. Box 83720 Boise, ID 83720-0043 (208) 334-4370 | www.doi.idaho.gov/sfm

Idaho Fire Protection Sprinkler Fitter License IDAPA 18.08.02.23

License of any person who install and/or maintain fire sprinkler systems and work under the supervisions of a Fire Protection Sprinkler Contractor.

To qualify, the applicant must:

- Provide an affidavit signed by a licensed fire protection sprinkler contractor that he has worked as a fitter for at least one thousand (1,000) hours per year for three (3) consecutive years. **New Applicants Only.
- Satisfactorily pass an examination prescribed by the State Fire Marshal. Examination fee is \$25 (non-refundable).

Application submittal shall include:

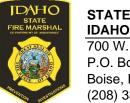
- Completed Idaho Fire Protection Sprinkler Fitter License application. Incomplete applications will not be processed.
- License fee of \$50 (Renewals: \$25).
- Signed affidavit from a licensed fire protection sprinkler contractor. **New Applicants Only.

All licenses shall be valid for a period of not longer than one (1) year and shall expire on the 31st day of December of each year, regardless of the month issued. Licenses not renewed by the expiration date shall become void. Fitter has 1 year after the expiration date to reinstate their license.

Application process are a **minimum of 2 weeks to a maximum of 120 days** upon receiving the application submittal. Incomplete submittals will be returned.

STATE FIRE MARSHAL IDAHO DEPARTMENT OF INSURANCE

STATE OF IDAHO Brad Little FOR OFFICE USE ONLY



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Application for Fire Protection Sprinkler Fitter License As specified by IDAPA 18.08.02.23

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SECTION 1 – N	NAME AND ADDRES	<u>S</u>			
FULL NAME (This is w		DATE OF BIRTH		BIRTH	
ADDRESS Number/Str	CITY	CITY		ZIP CODE	
PHONE NUMBER		EMAIL A	EMAIL ADDRESS		
SECTION 2 – E	MPLOYMENT				
NAME OF EMPLOYER		PHONE NUM	BER		
ADDRESS OF EMPLOYER/CONTRACTOR		CITY		STATE	ZIP CODE
I clarify under pena	uthorized Signature alty of perjury under the law in this application are true		o that all state	ments, answe	rs and
DATE	SIGNATURE	e and accurate.	PRINTE	ED NAME	
	OF	FICE USE ONLY			
		License	e Number:		
		Licer	License Issued:		
			Mailed:		
Approved by	 Date				